



Please type a plus sign (+) inside this box →



PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	<b>Application Num.</b>	10/687,254
	<b>Filing Date</b>	October 15, 2003
	<b>First Named Invent</b>	BARBARA HAVILAND MINOR
	<b>Title</b>	FLUOROCARBON, OXYGENATED AND NON-OXYGENATED LUBRICANT, AND COMPATIBILIZER COMPOSITION, AND METHOD FOR REPLACING REFRIGERATION COMPOSITION IN A REFRIGERATION SYSTEM
	<b>Group Art Unit</b>	Unassigned
	<b>Examiner Name</b>	Unassigned
	<b>Atty Docket Num.</b>	FL-1079 US CIP

I hereby appoint:

☒ Practitioners at Customer Number

23906

**\*23906\***

PATENT TRADEMARK OFFICE

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number

OR

☐ Practitioners at Customer Number

Place Bar Code Label Here

☐ Firm or  
Individual Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

<b>Name</b>	BARBARA HAVILAND MINOR
<b>Signature</b>	
<b>Date</b>	Jan 13, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.